



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

Tel (613) 632-5200  
Fax 613 632-5246

**D4018-041**  
**Job Sheet 188225**



Part No: D4018-041

Job Qty: 1 pcs

Part Name: AS350 Short Basket Lid Assembly



Part Weight: 0 lbs

Status: New

Priority: Medium

Job Created: 1/4/19

Job Tracking No:

Due Date: 2/5/19

Created By: Marie Lajeunesse

Type: SOLD

Description:

**Note:** DWG D4020 REV A, D4018 REV E SHEETS 1,2,3 IPP RevA: new issue DD 09.11.30 verified by:EC IPP  
Rev:B as per dwg revA 10.03.15 verified by:EC IPP Rev:C as per dwg RevB DD 10.04.16 verified by:EC IPP  
Rev:D as per dwg revC DD 10.08.18 verified by:EC IPP REV:E 13.08.21 DWG REV.D / ECN 13-624 DD  
VERF:JLM

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation              | Qty   | Start Date | Due Date | Standard  |                | Workcenter/Supplier             | Sign-off |
|-------|------------------------|-------|------------|----------|-----------|----------------|---------------------------------|----------|
|       |                        |       |            |          | Setup Hrs | Run Hrs        | Workcenter / Supplier Lead Time |          |
| 100   | Large Fab - Basket - 1 | 1 pcs | 2/5/19     | 0.00     | 7.69      | Large Fab - 1  |                                 |          |
|       |                        |       |            |          |           | Large Fab - 10 |                                 |          |
|       |                        |       |            |          |           | Large Fab - 2  |                                 |          |
|       |                        |       |            |          |           | Large Fab - 3  |                                 |          |
|       |                        |       |            |          |           | Large Fab - 4  | Cpc                             |          |
|       |                        |       |            |          |           | Large Fab - 5  |                                 |          |
|       |                        |       |            |          |           | Large Fab - 6  |                                 |          |
|       |                        |       |            |          |           | Large Fab - 7  |                                 |          |
|       |                        |       |            |          |           | Large Fab - 8  |                                 |          |
|       |                        |       |            |          |           | Large Fab - 9  |                                 |          |
| 110   | QC 9                   | 1 pcs | 2/5/19     | 0.00     | 0.00      | QC 9 - 10      |                                 |          |
|       |                        |       |            |          |           | QC 9 - 18      |                                 |          |
|       |                        |       |            |          |           | QC 9 - 24      |                                 |          |
|       |                        |       |            |          |           | QC 9 - 43      | SS                              |          |
|       |                        |       |            |          |           | QC 9 - 50      |                                 |          |
|       |                        |       |            |          |           | QC 9 - 9       |                                 |          |
| 120   | QC 5                   | 1 pcs | 2/5/19     | 0.00     | 0.00      | QC 5 - 10      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 12      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 17      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 18      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 19      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 22      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 24      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 3       |                                 |          |
|       |                        |       |            |          |           | QC 5 - 38      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 42      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 43      | SS                              |          |
|       |                        |       |            |          |           | QC 5 - 49      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 51      |                                 |          |
|       |                        |       |            |          |           | QC 5 - 58      |                                 |          |

Entered: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / ROUTE UPDATE

NCR No. \_\_\_\_\_

Route update only ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                               |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------|--|
| Job: _____<br><br>Part No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/> | <b>DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/> </div> <div>           Eng. (Non-AW) <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Water Jet <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Quality <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                      |  |                               |  |
| Date : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Sequence #: _____                                                                                                                 | QTY Affected : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | MRB (QSI042)                  |  |
| <b>Description Work Order Deviation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                   | <b>Disposition</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <b>Completed By</b>           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>Lead hand / Supervisor</b> |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                               |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>QC / QA Coordinator</b>    |  |
| <b>Root Cause</b><br><br><div style="display: flex;"> <div style="flex: 1;">           Operator <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Presservation <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Human Factors <input type="checkbox"/> </div> <div style="flex: 1;"> <input type="checkbox"/> Pressure/Forced<br/> <input type="checkbox"/> Bending<br/> <input type="checkbox"/> Crushing<br/> <input type="checkbox"/> Cracks<br/> <input type="checkbox"/> Crimp/Kink/Ripple/Wave/Twist<br/> <input type="checkbox"/> Marks/Chatter<br/> <input type="checkbox"/> Mislabeled         </div> </div> |                                                                                                                                   | <b>FAULT CATEGORY</b><br><br><div style="display: flex;"> <div style="flex: 1;"> <input type="checkbox"/> Contamination<br/> <input type="checkbox"/> Misaligned/off center<br/> <input type="checkbox"/> BOM/Route<br/> <input type="checkbox"/> Broken/Damage/Defect<br/> <input type="checkbox"/> Incomplete/Unclear Instructions<br/> <input type="checkbox"/> Drill Holes<br/> <input type="checkbox"/> Fit/Function         </div> <div style="flex: 1;"> <input type="checkbox"/> Power Loss/Surge<br/> <input type="checkbox"/> Folio/Program<br/> <input type="checkbox"/> Grain Direction<br/> <input type="checkbox"/> Weld<br/> <input type="checkbox"/> Wrong Stock Pulled<br/> <input type="checkbox"/> Out of Sequence<br/> <input type="checkbox"/> Off-set/Set-up         </div> <div style="flex: 1;"> <input type="checkbox"/> Positioned Wrong<br/> <input type="checkbox"/> Outside Tolerance<br/> <input type="checkbox"/> Drawing<br/> <input type="checkbox"/> Finish<br/> <input type="checkbox"/> Part Lost/Missing<br/> <input type="checkbox"/> Misread         </div> </div> |  |                               |  |
| Other/Details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                               |  |



|                                          |        |           |                          |              |  |
|------------------------------------------|--------|-----------|--------------------------|--------------|--|
|                                          |        |           |                          | QC 5 - 68    |  |
|                                          |        |           |                          | QC 5 - 9     |  |
|                                          |        |           |                          | QC 5 - 50    |  |
|                                          |        |           |                          | QC 5 - 30    |  |
| 130 Powdercoat - 4 Black Sand -B4B 1 pcs | 2/5/19 | 0.00 0.42 | Powdercoat - 1 - B4B     | BEB 19-01-18 |  |
|                                          |        |           | Powdercoat - 2 - B4B     |              |  |
|                                          |        |           | Powdercoat - 3 - B4B     |              |  |
|                                          |        |           | Powdercoat - 4 - B4B     |              |  |
| 140 Handfinish - 3-1- WingWalk-B4B 1 pcs | 2/5/19 | 0.00 0.88 | Handfinish - 3 - 1 - B4B | BEB 19-01-22 |  |
|                                          |        |           | Handfinish - 3 - 2 - B4B |              |  |
|                                          |        |           | Handfinish - 3 - 3 - B4B |              |  |
|                                          |        |           | Handfinish - 3 - 4 - B4B |              |  |
|                                          |        |           | Handfinish - 3 - 5 - B4B |              |  |
| 150 QC 3 1 pcs                           | 2/5/19 | 0.00 0.00 | QC 3 - 10                | BEB 19-01-22 |  |
|                                          |        |           | QC 3 - 13                |              |  |
|                                          |        |           | QC 3 - 15                |              |  |
|                                          |        |           | QC 3 - 17                |              |  |
|                                          |        |           | QC 3 - 18                |              |  |
|                                          |        |           | QC 3 - 2                 |              |  |
|                                          |        |           | QC 3 - 26                |              |  |
|                                          |        |           | QC 3 - 28                |              |  |
|                                          |        |           | QC 3 - 3                 |              |  |
|                                          |        |           | QC 3 - 30                |              |  |
|                                          |        |           | QC 3 - 34                |              |  |
|                                          |        |           | QC 3 - 36                |              |  |
|                                          |        |           | QC 3 - 38                |              |  |
|                                          |        |           | QC 3 - 41                |              |  |
|                                          |        |           | QC 3 - 51                |              |  |
|                                          |        |           | QC 3 - 58                |              |  |
|                                          |        |           | QC 3 - 59                |              |  |
|                                          |        |           | QC 3 - 6                 |              |  |
|                                          |        |           | QC 3 - 68                |              |  |
|                                          |        |           | QC 3 - 9                 |              |  |
| 160 Packaging 3-1 - Stock - B4B 1 pcs    | 2/5/19 | 0.00 0.00 | Packaging 3 - 1 - B4B    | BEB 19-01-22 |  |
|                                          |        |           | Packaging 3 - 2 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 3 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 4 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 5 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 6 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 7 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 8 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 9 - B4B    |              |  |
|                                          |        |           | Packaging 3 - 10 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 11 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 12 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 13 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 14 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 15 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 16 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 17 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 18 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 19 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 20 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 21 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 22 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 23 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 24 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 25 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 26 - B4B   |              |  |
|                                          |        |           | Packaging 3 - 27 - B4B   |              |  |

Entered: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / ROUTE UPDATE

NCR No. \_\_\_\_\_

Route update only ☐

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| Job: _____<br><br>Part No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/> | <b>DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/> </div> <div>           Eng. (Non-AW) <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Water Jet <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Quality <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                        |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Sequence #:                                                                                                                       | QTY Affected :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | MRB (QSI042)           |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                   | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Completed By           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Lead hand / Supervisor |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | QC / QA Coordinator    |  |
| <b>Root Cause</b><br><br><div style="display: flex; flex-direction: column;"> <div>Operator <input type="checkbox"/></div> <div>Manufacturing Process <input type="checkbox"/></div> <div>Equip/Tooling <input type="checkbox"/></div> <div>Handling/Presservation <input type="checkbox"/></div> <div>Material <input type="checkbox"/></div> <div>Product Improvement <input type="checkbox"/></div> <div>Process Improvement <input type="checkbox"/></div> <div>Human Factors <input type="checkbox"/></div> </div> |                                                                                                                                   | <b>FAULT CATEGORY</b><br><br><div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Pressure/Forced<br/> <input type="checkbox"/> Bending<br/> <input type="checkbox"/> Crushing<br/> <input type="checkbox"/> Cracks<br/> <input type="checkbox"/> Crimp/Kink/Ripple/Wave/Twist<br/> <input type="checkbox"/> Marks/Chatter<br/> <input type="checkbox"/> Mislabeled         </div> <div style="width: 50%;"> <input type="checkbox"/> Contamination<br/> <input type="checkbox"/> Misaligned/off center<br/> <input type="checkbox"/> BOM/Route<br/> <input type="checkbox"/> Broken/Damage/Defect<br/> <input type="checkbox"/> Incomplete/Unclear Instructions<br/> <input type="checkbox"/> Drill Holes<br/> <input type="checkbox"/> Fit/Function         </div> <div style="width: 50%;"> <input type="checkbox"/> Power Loss/Surge<br/> <input type="checkbox"/> Folio/Program<br/> <input type="checkbox"/> Grain Direction<br/> <input type="checkbox"/> Weld<br/> <input type="checkbox"/> Wrong Stock Pulled<br/> <input type="checkbox"/> Out of Sequence<br/> <input type="checkbox"/> Off-set/Set-up         </div> <div style="width: 50%;"> <input type="checkbox"/> Positioned Wrong<br/> <input type="checkbox"/> Outside Tolerance<br/> <input type="checkbox"/> Drawing<br/> <input type="checkbox"/> Finish<br/> <input type="checkbox"/> Part Lost/Missing<br/> <input type="checkbox"/> Misread         </div> </div> |  |                        |  |
| Other/Details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                        |  |

|                |       |        |           |                        |             |
|----------------|-------|--------|-----------|------------------------|-------------|
|                |       |        |           | Packaging 3 - 28 - B4B |             |
|                |       |        |           | Packaging 3 - 29 - B4B |             |
|                |       |        |           | Packaging 3 - 30 - B4B |             |
|                |       |        |           | Packaging 3 - 31 - B4B |             |
|                |       |        |           | Packaging 3 - 32 - B4B |             |
|                |       |        |           | Packaging 3 - 33 - B4B |             |
|                |       |        |           | Packaging 3 - 34 - B4B |             |
|                |       |        |           | Packaging 3 - 35 - B4B |             |
| 170 QC 21 - SA | 1 pcs | 2/5/19 | 0.00 0.00 | QC 21 - SA - 21        | JAN 22 2019 |
|                |       |        |           | QC 21 - SA - 70        | 21          |

Part Op 100 - (Weld per dwg A/R S.S. rod Batch: 138840) 1- assemble ribs , weld as per dwg D4018 using DT9607B 2- weld Descriptions: hinge (3) and Mounting brackets as per dwg D4018 \*\*\*inspect before welding mesh\*\*\* 3- Cut mesh as per dwg D4020-7 4- tack weld mesh on basket as per dwg D4018 \*\*\*make sure to place mesh correctly on lid, check with label plate before tacking mesh\*\*\*

110 - (QC9- Inspect visual per QSI004- Fusion Welds)

120 - (QC5- Inspect part completeness to step on W/O)

130 - (Black Sandtex(Ref:4.3.5.7) per QSI005 4.3) \*\*\* mask sides of hinge prior to powdercoat\*\*\*

140 - (Wing Walk as per dwg QSI005 4.4 Batch: 1138963) 1- Mask data plate and apply wing walk on outside surface of mesh as per dwg Install placard and label as per dwg

150 - (QC3- Inspect Part Finish)

160 - (Identify as per dwg & Stock Location: \_\_\_\_\_)

170 - (QC21- Final Inspection - Work Order Release)

M138839 START: 9:10 TEMP: 300° FINISH: 9:40

#### Job BOM

| Part / Item    | Component Name                     | Quantity       | Operation                  | Container                  |
|----------------|------------------------------------|----------------|----------------------------|----------------------------|
| D2581          | Mounting Bracket                   | 2 pcs (2 ea)   | 100-Large Fab - Basket - 1 | <u>S 125 289</u>           |
| D4016-3 ✓      | Hinge Half, Lid                    | 3 pcs (3 ea) ✓ | 100-Large Fab - Basket - 1 | <u>S 121 277</u>           |
| D4018-1 ✓      | Rib                                | 2 pcs (2 ea) ✓ | 100-Large Fab - Basket - 1 | <u>S 111 234</u>           |
| D4018-3 ✓      | Rib                                | 2 pcs (2 ea) ✓ | 100-Large Fab - Basket - 1 | <u>S 111 293</u>           |
| D4018-5 ✓      | Rib                                | 6 pcs (6 ea) ✓ | 100-Large Fab - Basket - 1 | <u>S 139 802</u>           |
| D4021-3 ✓      | Data Plate                         | 1 pcs (1 ea)   | 100-Large Fab - Basket - 1 | <u>S 114 284</u>           |
| D4035-043 ✓    | Lid Rib Assembly, Aft (350 Basket) | 2 pcs (2 ea) ✓ | 100-Large Fab - Basket - 1 | <u>S 140 450 S 143 614</u> |
| M304EX0.75-16F | Expanded Metal Flat SS             | 16 sf (16 ea)  | 100-Large Fab - Basket - 1 | <u>S 125 258</u>           |

#### Job Allocations

| Operation                  | Component Part | Required | Inventory | Allocated |
|----------------------------|----------------|----------|-----------|-----------|
| 100-Large Fab - Basket - 1 | D2581          | 2        | 15        | 0         |
|                            | D4016-3        | 3        | 185       | 0         |
|                            | D4018-1        | 2        | 14        | 0         |
|                            | D4018-3        | 2        | 14        | 0         |
|                            | D4018-5        | 6        | 18        | 0         |
|                            | D4021-3        | 1        | 12        | 0         |
|                            | D4035-043      | 2        | 4         | 0         |
|                            | M304EX0.75-16F | 16       | 1,500     | 0         |

#### Part Specifications

Specifications could not be found.

Plex 1/4/19 12:07 PM Dart.lajeunesse.marie



Container No: S145425



Part: D4018-041

Job No: 188225

Serial No/Batch: S145425

Revision:

Inspector:

Exp Date:

Instructions: Various STC's

Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
CANADA  
TEL.: 1 613 632-5200  
Email: sales@dartaero.com  
www.dartaerospace.com

Date: 01/16/19

007531



Entered: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / ROUTE UPDATE

NCR No. \_\_\_\_\_

Route update only ☐

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| Job: _____<br><br>Part No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/> | <b>DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/> </div> <div>           Eng. (Non-AW) <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Water Jet <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Quality <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                      |  |                        |  |
| Date : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Sequence #: _____                                                                                                                 | QTY Affected : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | MRB (QSI042)           |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                   | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | Completed By           |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Lead hand / Supervisor |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | QC / QA Coordinator    |  |
| <b>Root Cause</b><br><br><div style="display: flex;"> <div style="flex: 1;">           Operator <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Presservation <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Human Factors <input type="checkbox"/> </div> <div style="flex: 1;"> <input type="checkbox"/> Pressure/Forced<br/> <input type="checkbox"/> Bending<br/> <input type="checkbox"/> Crushing<br/> <input type="checkbox"/> Cracks<br/> <input type="checkbox"/> Crimp/Kink/Ripple/Wave/Twist<br/> <input type="checkbox"/> Marks/Chatter<br/> <input type="checkbox"/> Mislabeled         </div> </div> |                                                                                                                                   | <b>FAULT CATEGORY</b><br><br><div style="display: flex;"> <div style="flex: 1;"> <input type="checkbox"/> Contamination<br/> <input type="checkbox"/> Misaligned/off center<br/> <input type="checkbox"/> BOM/Route<br/> <input type="checkbox"/> Broken/Damage/Defect<br/> <input type="checkbox"/> Incomplete/Unclear Instructions<br/> <input type="checkbox"/> Drill Holes<br/> <input type="checkbox"/> Fit/Function         </div> <div style="flex: 1;"> <input type="checkbox"/> Power Loss/Surge<br/> <input type="checkbox"/> Folio/Program<br/> <input type="checkbox"/> Grain Direction<br/> <input type="checkbox"/> Weld<br/> <input type="checkbox"/> Wrong Stock Pulled<br/> <input type="checkbox"/> Out of Sequence<br/> <input type="checkbox"/> Off-set/Set-up         </div> <div style="flex: 1;"> <input type="checkbox"/> Positioned Wrong<br/> <input type="checkbox"/> Outside Tolerance<br/> <input type="checkbox"/> Drawing<br/> <input type="checkbox"/> Finish<br/> <input type="checkbox"/> Part Lost/Missing<br/> <input type="checkbox"/> Misread         </div> </div> |  |                        |  |
| Other/Details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                        |  |